Please type a plus sign (4) inside this	bo	+
VC.			_

EXPRESS MAIL NO. EV064993128US

PTO/SB/81 (10-00)

r use through 10/31/2002. OMB 0651-0035 Office; U.S. DEPARTMENT OF COMMERCE U.S. Patent and Tradema

Under the Paperwork Reduction Act of 1995, no person		information unless it displays a valid OMB control number
	Application Number	09/955,750
ELECTION AND POWER OF	Filing Date	September 18, 2001
ATTORNEY OR	First Named Inventor	Jon W. Brown
AUTHORIZATION OF AGENT	Group Art Unit	
AOTHORIZATION OF AGENT	Examiner Name	
	Attorney Docket Number	100105.401

Practitioners at Seed IP Law Group PLLC OR Practitioner(s) named below: Name Registration Number Registration Number as mylour attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or	I hereby app	oint:				
Practitioner(s) named below: Name	X Practitione	ers at Sec	ed IP Law Group PLLC			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor Signature Date Name Registration Number Registration Number Registration Number Registration Number and to transact all business in the Patent and Trademark Office connected therewith. State publication to: Telephone Fax	OR				00500	
as mylour attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith. Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address City State ZIP Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Vernis Shepard Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Practitione	r(s) nam	ed below:		PATENT TRADEMARK OFFICE	
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Firm or Individual Name Address City State ZIP Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Perhis Shepard Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		Name Registrat		ion Number		
Please change the correspondence address for the above-identified application to: ☐ The above-mentioned Customer Number. OR ☐ Firm or Individual Name Address Address City Country Telephone ☐ Applicant/Inventor. ☑ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). ☑ As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. ☑ *Total of 1 forms are submitted.	as my/our atto	orney(s)	or agent(s) to prosecute the application is	dentified above, and to	o transact all business in the Patent and	
The above-mentioned Customer Number. OR Firm or Individual Name Address Address City State ZIP Country Telephone Fax I am the: Applicant/Inventor. Apsignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. ▼*Total of 1 forms are submitted.	Trademark Off	fice conr	nected therewith.			
Individual Name Address City Country Telephone I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Date NoTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. X *Total of 1 forms are submitted.	The above-mentioned Customer Number.					
City State ZIP Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Pennis Shepard Signature Date NOTE: Signature's of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. X *Total of 1 forms are submitted.		Name				
Country Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Permis Shepard Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address			-		
Telephone Fax I am the: Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Demnis Shepard Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. *Total of 1 forms are submitted.	Address					
Telephone Fax I am the: ☐ Applicant/Inventor. ☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). ☐ As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name termis Shepard Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. ▼ *Total of 1 forms are submitted.	City		S	state	ZIP	
I am the: ☐ Applicant/Inventor. ☐ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). ☐ As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Dennis Shepard Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. ▼ *Total of 1 forms are submitted.	Country					
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the exclusion of the inventor SIGNATURE of Applicant or Assignee of Record Name Demis Shepard Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. *Total of 1 forms are submitted.	Telephone			Fax		
Name Dennis Shepard Signature Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. X *Total of 1 forms are submitted.	 Applicant/Inventor. ✓ Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). ✓ As assignee of record of the entire interest hereby elect, under 37 C.F.R. § 3.71, to prosecute the application to the 					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. X *Total of 1 forms are submitted.	SIGNATURE of Applicant or Assignee of Record					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. X *Total of 1 forms are submitted.	Name [Name Dennis Shepard				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*. X *Total of 1 forms are submitted.	Signature Many Standard					
Submit multiple forms if more than one signature is required, see below*. X *Total of 1 forms are submitted.	1/10/01/0					
X *Total of <u>1</u> forms are submitted.	Submit multiple forms if more than one signature is required, see below*.					
	X *Total of 1 for	orms are	e submitted.			

Comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.